

Joint Standing Committee on Health and Human Services

LD 201

An Act to License Freestanding Birth Centers

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FULLER RAND	ONTP	

LD 201 proposed to require that all freestanding birth centers be licensed by the Department of Human Services. The bill also proposed to set forth the types of licenses and the process and standards for licensure.

LD 611

An Act to Aid Implementation of the Maine Medical Marijuana Act of 1998

PUBLIC 580

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
RAND QUINT	OTP-AM MAJ ONTP MIN	S-451

LD 611 was a concept draft pursuant to Joint Rule 208.

This bill proposed to create a pilot program allowing one medical marijuana distribution center in the State. The center would be incorporated as a nonprofit entity managed and overseen by a diverse community group. In particular, this bill proposed the following.

1. A single nonprofit center, referred to herein as the "center," would be incorporated for the purpose of cultivating and distributing medical marijuana to individuals qualified under the Maine Medical Marijuana Act of 1998. The center would also be authorized to distribute and/or lend cultivation equipment, supplies and seeds to qualified individuals for cultivation for personal use.
2. The center would be overseen and managed by a community board made up of a wide range of individuals drawn from the community area of the center's site. Members of the community board might include members drawn from the following groups: law enforcement, current and former patients, patient advocates, hospice facilities, education professionals, legal community, business, pharmacists, clergy, medicine and other groups involved in the community.
3. The framework for the operation of the community board would be included in the enabling legislation. Among other things, the framework would provide for term length of board members, qualifying members as described above, civil and criminal immunity protection for board members and employees acting within the scope of the center's mission and the authorization to use Maine's nonprofit business statute as a basis for organizational structure.
4. The center would be able to charge patients for the product to help cover the cost of the center. The center would also be prohibited from securing medical marijuana from outside the State.
5. A mandatory registry system for patients using the center would be created to ensure that only qualified individuals access the center's services. The system would be maintained by the center with oversight and input from the sheriff of the county within which the center is located. Other law enforcement personnel could

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confirm the participation of individuals in the center's services, if necessary, through that particular sheriff's office or the center. Among other things, the registry system would consist of a photo identification card, and the center would be authorized by the patient to check with the individual's physician that the individual falls within the provisions of the Maine Medical Marijuana Act of 1998. The center would also check with the appropriate state medical board or with the statewide medical association to determine that the physician is duly licensed to practice in the State.

6. The center would be required to keep records of patients' usage from the center in order to monitor compliance with statutory limits.
7. The center would be required to report to the Legislature within 18 months of commencement of operation concerning the center's operations, an evaluation in meeting patients' needs and the unmet needs of patients. The report could also contain suggestions for additional legislation to meet needs of patients. The Legislature could then take additional action, including the authorization of additional sites within the State.
8. A person qualified under the Maine Medical Marijuana Act of 1998 who possessed appropriate documentation under the current law of that person's qualification at the time of a stop or encounter with law enforcement would not be subject to seizure of a lawful amount of marijuana or the equipment necessary to maintain, grow or consume medical marijuana.

Committee Amendment "A" (S-451) was the report of the majority of the members of 2 committees, the Joint Standing Committee on Criminal Justice and the Joint Standing Committee on Health and Human Services.

This amendment proposed to replace the bill and change the title. It proposed to clarify the definition of a designated care giver for a patient eligible to use marijuana for medical purposes, increase the amount of harvested marijuana that may be possessed for medical purposes from 1.25 ounces to 2.5 ounces and add an affirmative defense provision to clarify that an eligible patient or designated care giver has an affirmative defense under the law passed as a citizen initiative in 1999. It proposed to remove from the bill the provisions that would have established a nonprofit distribution center governed by a community board and a mandatory registration system.

Enacted law summary

Public Law 2001, chapter 580 clarifies the definition of a designated care giver for a patient eligible to use marijuana for medical purposes, increases the amount of harvested marijuana that may be possessed for medical purposes from 1.25 ounces to 2.5 ounces and adds an affirmative defense provision to clarify that an eligible patient or designated care giver has an affirmative defense under the law passed as a citizen initiative in 1999.

LD 863

**Resolve, to Establish Crisis Assessment and Triage Centers for
Children in the State**

ONTP

Sponsor(s)
ETNIER
SMALL

Committee Report
ONTP

Amendments Adopted

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LD 863 proposed to direct the Department of Human Services and the Department of Behavioral and Developmental Services to establish crisis assessment and triage centers to help keep children in crisis situations in their community and stop children who need services from being sent out of state for treatment.

LD 898 An Act to Improve Public Health in the State

ONTP

<u>Sponsor(s)</u> FULLER		<u>Committee Report</u> ONTP		<u>Amendments Adopted</u>
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LD 898 was a concept draft pursuant to Joint Rule 208.

This bill proposed to authorize the Department of Human Services, Bureau of Health to designate Health Districts for planning and developing health promotion and disease prevention services for all citizens of Maine. Once established, the Health Districts would encourage and support equitable distribution of health promotion and disease prevention services and would improve access to health care and create local leadership for activities to improve the health and well-being of Maine citizens.

This bill also proposed to provide funds to support the work of coordinating Health District Council in each Health District. The Health District Councils, which would include the agencies, hospitals, schools and municipal governments who can assist with access to and delivery of health promotion and disease prevention services, would have been responsible for ensuring that the following 10 essential public health services are adequately addressed within the various elements of the health system in each region:

1. Monitoring health status to identify community health problems;
2. Diagnosing and investigating health problems and health hazards in the community;
3. Informing, educating, and empowering people about health issues;
4. Mobilizing community partnerships and acting to identify and solve health problems;
5. Developing policies and plans that support individual and community health efforts;
6. Enforcing laws and regulations that protect health and ensure safety;
7. Linking people to needed personal health services and ensuring the provision of care when otherwise unavailable;
8. Ensuring a competent public health and personal health care workforce;
9. Evaluating effectiveness, accessibility and quality of personal and population-based health services; and
10. Researching for new insights and innovative solutions to health problems.

Funding for the program was estimated at \$3,875,000 in the first year and continuing with annual cost-of-living increases in each future year. This bill proposed to fund these costs by increasing the cigarette tax.

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LD 961 **An Act to Expand Benefits Under the Elderly Low-cost Drug Program** **ONTP**

<u>Sponsor(s)</u> DUDLEY MARTIN	<u>Committee Report</u> ONTP	<u>Amendments Adopted</u> H-492
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LD 961 proposed to add depression and diabetic supplies to the basic component list of the elderly low-cost drug program.

LD 1085 **Resolve, to Improve Staffing in Health Care Settings** **ONTP**

<u>Sponsor(s)</u> PENDLETON FULLER	<u>Committee Report</u> ONTP	<u>Amendments Adopted</u>
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LD 1085 proposed to require the Department of Human Services to amend its rules regarding the licensing of health care facilities, including, but not limited to, home care, acute care and long-term care settings; residential care facilities; hospitals; and other health care facilities to require staffing levels based on patient acuity level. The rules proposed to base appropriate staffing for licensing purposes on patient acuity level as determined by a professional nursing assessment done by a professional registered nurse of patient physical, behavioral and psycho-social status and need for health care. The bill proposed that the rules, which would be routine technical rules, be adopted by January 1, 2002.

LD 1208 **An Act to Plan for the Delivery of Developmental Disabilities and Autism Services** **ONTP**

<u>Sponsor(s)</u> LONGLEY	<u>Committee Report</u> ONTP	<u>Amendments Adopted</u>
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LD 1208 proposed to require the Department of Mental Health, Mental Retardation and Substance Abuse Services to take the lead in planning for the development of comprehensive developmental disabilities and autism services for children and families. The bill proposed to require a planning process that involves state agencies, providers of services, professionals and children and families. The bill proposed to require a report by February 1, 2002 to the Joint Standing Committee on Health and Human Services that would include a plan for the development of services.

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LD 1346 **Resolve, to Establish a Commission to Study the Health Care Workforce Shortage** **ONTP**

<u>Sponsor(s)</u> FULLER PENDLETON	<u>Committee Report</u> ONTP	<u>Amendments Adopted</u>
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LD 1346 proposed to establish the Commission to Study the Health Care Workforce Shortage to study the labor shortage of health professionals in the State and to report, together with any necessary implementing legislation, to the joint standing committees of the Legislature having jurisdiction over health and human services, labor and education and cultural affairs matters no later than January 1, 2003.

LD 1363 **An Act to Reduce Medical Errors and Improve Patient Health** **PUBLIC 678**

<u>Sponsor(s)</u> RAND KANE	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-527 S-604 GOLDTHWAIT
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LD 1363 proposed to establish the Maine Health Care Quality Improvement Center to improve the quality of health care provided to patients, increase patient safety and reduce medical errors. The bill proposed to create a mandatory reporting system for medical errors and events and incidents injurious to patients that involve health care facilities designating these events and incidents "sentinel events."

Committee Amendment "A" (S-527) proposed to establish a sentinel events reporting system for hospitals and other facilities licensed by the Division of Licensing and Certification in the Department of Human Services, but not nursing facilities. The amendment proposed adding 4 positions for one year and proposed General Fund funding.

Senate Amendment "B" (S-604) proposed to reduce the funding to 2 positions for 2 months beginning May 1, 2003. It proposed to delay the effective date of the law to May 1, 2003.

Enacted law summary

Public Law 2001, chapter 678 establishes a sentinel event reporting system to improve the quality of health care provided to patients, increase patient safety and reduce medical errors for hospitals and other facilities licensed by the Division of Licensing and Certification, but not nursing facilities. The effective date is 5/1/03.

LD 1512 **An Act to Increase Long-term Care Options for Low-income Citizens of the State** **ONTP**

<u>Sponsor(s)</u> EDMONDS ETNIER	<u>Committee Report</u> ONTP	<u>Amendments Adopted</u>
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LD 1512 proposed to provide a comprehensive system by which the Department of Human Services would subsidize assisted living arrangements for low-income citizens of the State.

LD 1514 **An Act to Ensure Fairness in the Regulation and Reimbursement of Nursing Facilities** **PUBLIC 600**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARTIN KANE	OTP-AM	S-501

LD 1514 proposed to provide a process for resolving disputes that arise when the department's Division of Licensing and Certification inspects and finds deficiencies in nursing facilities. The bill proposed to require the department to follow the same procedures in the case of deficiencies with respect to state law that are followed in the case of deficiencies with respect to federal law. It also proposed to require the department to study the feasibility of an alternative regulatory scheme for fines and penalties.

The bill proposed to allow facilities with fewer than 60 beds to choose not to participate as Medicare certified skilled nursing facilities.

The bill proposed to address the problem that arises when cost of care determinations affecting particular Medicaid beneficiaries are delayed because information is unavailable to the department and the facility. The bill proposed to prevent the department from imposing on the facility the cost that should be borne by the resident of the facility, when that resident's obligation to pay for a portion of the cost of care changes due to change in circumstances that affects eligibility for coverage.

Committee Amendment "A" (S-501) proposed to allow a nursing facility to decline to admit a prospective resident if the facility lacks qualified staff to meet the person's needs. The nursing facility would retain its obligation to serve its current residents.

Enacted law summary

Public Law 2001, chapter 600 allows nursing facilities to refuse to admit a prospective resident which the facility is unable to serve because of lack of adequate staff. It requires rulemaking to ensure that persons handling the resources of persons in long-term care use those resources responsibly.

LD 1545 **An Act to Increase the Supply of Medical Services to Consumers** **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
TURNER DUGAY	ONTP MAJ OTP-AM MIN	

LD 1545 proposed to repeal the certificate of need law.

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LD 1588

An Act to Appropriate Funds for a Study to Determine the Feasibility of a Medical School in Maine

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARTIN	ONTP MAJ	
SAXL	OTP-AM MIN	

LD 1588 proposed to appropriate money to the University of Maine System to hire Medical Care Development, Inc. to conduct a feasibility study of a medical school in the State.

LD 1603

An Act to Expand Family Life Education Services in Maine Schools

PUBLIC 654

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FULLER	OTP-AM	H-1024
MILLS		

LD 1603 proposed to direct the Commissioner of Education to take action to enhance family life education for students in kindergarten to high school. The bill appropriated \$750,000 for family life education.

Committee Amendment "A" (H-1024) replaced the bill and its title. It proposed to direct the Commissioner of Human Services to undertake initiatives in order to expand and enhance comprehensive family education services. It proposed to strengthen the language on abstinence. It removed specific references to the Family Planning Association of Maine and learning results. It also proposed to allow a parent to not have that parent's child participate in a comprehensive family life education program. It removed the appropriation section and added a fiscal note.

House Amendment "A" to Committee Amendment "A" (H-1025) proposed to specify that comprehensive family life education must be developmentally appropriate and promote responsible behavior regarding sexuality with an emphasis on abstinence. The amendment also included other community service providers in the category of agencies with which the Commissioner of Human Services may contract. (Not adopted)

House Amendment "B" to Committee Amendment "A" (H-1060) proposed to amend the definition of "comprehensive family life education" to include education that respects parental values. (Not adopted)

Senate Amendment "A" to Committee Amendment "A" (S-550) proposed to include other community service providers in the category of agencies with which the Commissioner of Human Services may contract. (Not adopted)

Enacted law summary

Public Law 2001, chapter 654 directs the Commissioner of Human Services to undertake initiatives in order to expand and enhance comprehensive family education services for students in kindergarten to high school. It also allows a parent to not have that parent's child participate in a comprehensive family life education program.

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LD 1768

An Act to Create a Comprehensive Prescription Insurance Plan for Maine Seniors through the Implementation of the Recommendations of the Heinz Family Philanthropies Report

ONTP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BENNETT	ONTP	

LD 1768 was a concept draft pursuant to Joint Rule 208.

This bill proposed to create a comprehensive prescription insurance plan for senior citizens of the State in accordance with the recommendations of the Heinz Family Philanthropies study regarding prescription drugs.

The plan would have included the following requirements:

1. All Maine citizens 62 years of age and older would be eligible;
2. The plan would be means tested. Premiums, copayments, deductibles and a catastrophic cap would all be tied to income levels and the consumer price index. Persons with the lowest income levels would also have the lowest catastrophic cap;
3. In determining the premiums, deductibles and catastrophic caps for married couples based on household income, a reduction would be given so that those couples are not penalized or disadvantaged;
4. A formulary based on incentives would be established with generic, preferred and nonpreferred drugs;
5. If a generic drug is available, a brand-name drug would be available only by paying the difference in cost between the generic and brand-name medication;
6. "Lifestyle" drugs would be excluded from the plan; and
7. The plan would sunset after 4 full fiscal years.

LD 1799

An Act to Strengthen the Certificate of Need Law

PUBLIC 664

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MICHAUD MH	OTP-AM MAJ	S-507
	ONTP MIN	S-573 DOUGLASS

LD 1799 proposed to repeal and replace the Maine Certificate of Need Act of 1978. This bill proposed to require that health prevention services be part of reviewable projects, clarify when certificate of need waivers can be granted, clarify the ability of the Department of Human Services to impose conditions on a certificate of need, change certain dates, eliminate the Certificate of Need Advisory Committee and authorize the commissioner to establish a new advisory committee.

Committee Amendment "A" (S-507) proposed to clarify language in the bill. It proposed to allow the Commissioner to hold a public hearing and to increase the monetary thresholds for certificates of need.

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Senate Amendment "B" to Committee Amendment "A" (S-573) proposed to provide standards for the Commissioner to review a certificate of need project after the certificate has been granted.

Enacted law summary

Public Law 2001, chapter 664 repeals and replaces the Maine Certificate of Need Act of 1978. This law clarifies when certificate of need waivers can be granted, clarifies the ability of the Department of Human Services to impose conditions on a certificate of need, changes certain dates, and eliminates the Certificate of Need Advisory Committee. It clarifies the authority of the Commissioner to review a project for which a certificate of need has been granted.

See also Public Law 2001, chapter 710, sections 9 and 10 clarifying that 22 MRSA section 332 (review after approval) applies retroactively to applications filed or approved on or after January 1, 1999.

LD 1843	An Act to Require that Temporary Nurse Agencies Verify Certified Nursing Assistants' Eligibility Before Hiring Certified Nursing Assistants	PUBLIC 494
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SNOWE-MELLO	OTP	

LD 1843 proposed to require a temporary nurse agency to verify the inclusion of a certified nursing assistant on the Maine Registry of Certified Nursing Assistants before hiring that certified nursing assistant.

Enacted law summary

Public Law 2001, chapter 494 requires a temporary nurse agency to verify the inclusion of a certified nursing assistant on the Maine Registry of Certified Nursing Assistants before hiring that certified nursing assistant.

LD 1847	An Act Regarding Fire Inspections for Foster Homes	PUBLIC 515
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
LAVERRIERE-BOUC LONGLEY	OTP	S-427 LONGLEY

LD 1847 proposed to change the fire inspection period to be every 2 years for those places licensed as family foster homes and specialized children's homes. It proposed to bring the licensing and fire inspection requirements in line with each other and ensure that all licensing requirements are addressed in a timely and coordinated manner.

Enacted law summary

Public Law 2001, chapter 515 changes the fire inspection period to be every 2 years for those places licensed as family foster homes and specialized children's homes. It brings the licensing and fire inspection requirements in line with each other and will ensure that all licensing requirements are addressed in a timely and coordinated manner.

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LD 1848 **An Act to Prohibit the Separation of a Husband and Wife Placed in State-funded Nursing Facilities** **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FOSTER SMALL	ONTP	

LD 1848 proposed to prohibit a husband and wife placed into nursing facilities that receive funding from the State from being placed into separate nursing facilities unless they so wished. Under the bill, a facility that cannot admit the spouse of a resident would have been required to ensure placement together within 14 days.

LD 1858 **Resolve, to Improve the Health of Maine Citizens Through Hepatitis C Prevention and Detection** **RESOLVE 88**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BRUNO	OTP-AM	H-860

LD 1858 proposed to direct the Department of Human Services, Bureau of Health to provide a media campaign to increase awareness of hepatitis C; access to laboratory testing for hepatitis C; education of medical and social service providers; epidemiological data collection; and coordination and evaluation of these initiatives. The implementation of these initiatives would be contingent on the receipt of federal funding or donations from private sources for these purposes.

Committee Amendment "A" (H-860) proposed to add an appropriations and allocations section and a fiscal note to the resolve.

Enacted law summary

Resolve 2001, chapter 88 directs the Department of Human Services, Bureau of Health to provide a media campaign to increase awareness of hepatitis C; access to laboratory testing for hepatitis C; education of medical and social service providers; epidemiological data collection; and coordination and evaluation of these initiatives. The implementation of these initiatives is contingent on the receipt of federal funding or donations from private sources for these purposes.

LD 1882 **Resolve, Directing the Department of Behavioral and Developmental Services to Recommend a Name for the New Psychiatric Treatment Center Located in Augusta** **ONTP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DAGGETT O'BRIEN J	ONTP	

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LD 1882 proposed to direct the Department of Behavioral and Developmental Services to recommend a name for the new psychiatric treatment center located in Augusta. See LD 2158, enacted as Resolve 2001, chapter 79.

LD 1891 **An Act Regarding Eligibility for Financing Through the Maine Health and Higher Educational Facilities Authority** **PUBLIC 609**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
BENNETT	OTP-AM	S-502

LD 1891 bill proposed to require that the majority of the members of the governing board of an assisted living facility receiving bonds from the Maine Health and Higher Education Facilities Authority be residents or family members of residents in the program.

Committee Amendment "A" (S-502) proposed to require unlicensed assisted living facilities to comply with the standardized contract and resident rights requirements applicable to licensed facilities.

Enacted law summary

Public Law 2001, chapter 609 requires that unlicensed assisted living facilities that receive funding from the Maine Health and Higher Education Facilities Authority comply with the standardized contract and resident rights requirements applicable to licensed facilities.

LD 1901 **Resolve, to Allow Persons with Disabilities to Purchase Coverage Under the Medicaid Program** **INDEF PP**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DOUGLASS	OTP-AM MAJ	
SAXL	ONTP MIN	

LD 1901 proposed to require the Department of Human Services to amend the rules allowing persons with disabilities to purchase coverage in the Medicaid program. The rules would maintain income eligibility limits while removing separate limits on earned and unearned income and would provide eligibility for employed persons who have a medically improved disability.

LD 1913 **Resolve, to Implement the Recommendations of the Health Care Workforce Steering Committee** **RESOLVE 89**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MICHAUD MH	OTP-AM MAJ	S-454
SAXL	ONTP MIN	

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LD 1913 proposed to create the Health Care Workforce Leadership Council to address the shortage of skilled health care workers in the State. The council would be composed of members from health care employers, health care workers and public and private postsecondary educational institutions.

Committee Amendment "A" (S-454) proposed to set the membership at 13, to have the Maine Technical College System provide staffing, and to require reports February 1, 2003 and November 3, 2004.

Enacted law summary

Resolve 2001, chapter 89 creates the Health Care Workforce Leadership Council to address the shortage of skilled health care workers in the State. The council is composed of members from health care employers, health care workers and public and private postsecondary educational institutions. The Maine Technical College System provides staffing. Reports are required January 1, 2003 and November 3, 2004.

LD 1916

An Act to Improve the Effectiveness of the Driver Education and Evaluation Programs

PUBLIC 511

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARTIN NUTTING R	OTP	

LD 1916 proposed to repeal and amend laws regarding the Driver Education and Evaluation Programs. It proposed to do the following:

1. Repeal the definition of "first offender with an aggravated operating-under-the-influence offense." Program changes eliminate the need for the definition;
2. Amend 2 affected motor vehicle laws to bring them into compliance with program changes. It proposed to correct one law by identifying the Office of Substance Abuse as the location of the Driver Education and Evaluation Programs;
3. Correct 2 laws by identifying the Department of Behavioral and Developmental Services as responsible for certification and licensing of alcohol and other drug treatment programs; and
4. Amend a requirement for after-care, when required, because of changes in treatment practices.

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Enacted law summary

Public Law 2001, chapter 511 repeals and amends laws regarding the Driver Education and Evaluation Programs. It makes the following changes.

1. It repeals the definition of "first offender with an aggravated operating-under-the-influence offense." Program changes eliminate the need for the definition.
2. It amends 2 affected motor vehicle laws to bring them into compliance with program changes. It corrects one law by identifying the Office of Substance Abuse as the location of the Driver Education and Evaluation Programs.
3. It corrects 2 laws by identifying the Department of Behavioral and Developmental Services as responsible for certification and licensing of alcohol and other drug treatment programs.
4. It amends a requirement for after care, when required, because of changes in treatment practices.

LD 1924

An Act to Support a Continuum of Quality Long-term Care Services

**PUBLIC 666
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MARTIN	OTP-AM	S-523
BROOKS		S-611 GOLDTHWAIT

LD 1924 proposed to amend the law administered by the State Board of Social Worker Licensure to permit issuance of conditional licenses following June 30, 2002 to individuals who seek employment in licensed nursing facilities, where the Commissioner of Human Services has certified that this option is necessary to permit nursing facilities to continue to attract and obtain qualified personnel.

The bill also proposed to require the Department of Human Services to make several changes in the system of payment for long-term care, including nursing facility services, residential care facility services and home health services, in order to fairly reflect the current cost of providing those services efficiently. These changes would include an overall requirement that the payment system reflect the current costs of efficiently providing necessary long-term care services, rebasing to the most recently available audited cost figures, rebasing every 3 years, relying on regional wage adjustments applied quarterly, adjusting for inflation using factors that reflect actual increases in operating costs experienced in Maine and allowing nursing facilities to retain savings that they may produce in routine component costs. The bill proposed to include language requiring recognition and payment as fixed costs of certain expenditures that increase the pool of qualified health care workers, including, but not limited to, employee education and training, tuition reimbursement and education loan forgiveness.

The bill further proposed to require that residential care reimbursement rules be changed to include recognition and payment as fixed costs of liability insurance and malpractice costs along with other types of insurance. The current reimbursement rules recognize fire insurance. The bill also proposed to require recognition of allowable costs without imposition of peer review caps.

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The bill proposed to require the Department of Human Services to amend its principles of reimbursement for both nursing facilities and residential care facilities to remove the occupancy penalty.

The bill also proposed to modify fair hearing proceedings on Medicaid payment issues. By October 1, 2002, the Department of Human Services would amend the rules governing fair hearing proceedings for appeals by providers of Medicaid payment rates to require that the hearing officer for these proceedings be an individual who is not employed by the department and to vest in the hearing officer final authority to issue appropriate rulings that are not subject to modification by the Commissioner of Human Services.

Committee Amendment "A" (S-523) proposed to allow inflation adjustments that reflect actual rates of inflation and interim payments for nursing and residential care facilities. It proposed to allow retention of savings by nursing facilities. It proposed to allow adult family care homes to be reimbursed for insurance costs. It proposed to loosen occupancy penalties. It proposed to require a independent hearing officer appeals process. It proposed to require the Governor to include full long-term care funding in the Governor's budget.

Senate Amendment "A" (S-611) proposed to remove reference to actual rates of inflation and to change the date of application of the retention of savings provisions to October 1, 2001. The amendment proposed to remove reimbursement provisions for private nonmedical institutions and adult family care homes. The amendment proposed to remove the provisions regarding the preparation of the budget by the Governor and to substitute a report on long-term care costs every two years beginning January 31, 2003.

Enacted law summary

Public Law 2001, chapter 666 requires the Department of Human Services to make several changes in the system of payment for nursing facility services. These changes include an overall requirement that the payment use regional wage adjustments, adjusting for inflation using factors that reflect increases in operating costs experienced in Maine and allowing nursing facilities to retain savings in routine component costs. The law requires the Department of Human Services to amend its principles of reimbursement for nursing facilities to lessen the occupancy penalty for facilities with fewer than 60 beds. The law also modifies fair hearing proceedings on Medicaid payment issues providing for an independent hearing officer. It requires reporting on long-term care costs and funding by January 31 every 2 years beginning January 31, 2003.

Public Law 2001, chapter 666 was enacted as an emergency measure April 11, 2002.

LD 1925

**Resolve, to Extend the Reporting Deadline for the Maine
Millennium Commission on Hunger and Food Security**

INDEF PP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SNOWE-MELLO	OTP	S-423 LONGLEY

LD 1925 proposed to extend the reporting deadline for the final report of the Maine Millennium Commission on Hunger and Food Security by 6 months to June 5, 2002.

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LD 1930

An Act to Ensure the Fair Collection of Overpayments

PUBLIC 551

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SIMPSON LONGLEY	OTP-AM	H-884

LD 1930 proposed to prohibit the Department of Human Services from collecting overpayments accrued in public benefit programs from people who were minors in the household at the time that their parent or other caretaker received the overpayment.

Committee Amendment "A" (H-884) proposed to replace the bill. This bill proposed to prohibit, to the extent permitted by federal law, the Department of Human Services from collecting overpayments accrued in the Temporary Assistance for Needy Families program, the Aid to Families with Dependent Children program and the food stamp program from people who were minors in the household at the time that their parent or other caretaker received the overpayment.

Enacted law summary

Public Law 2001, chapter 551 prohibits the Department of Human Services, to the extent permitted by federal law, from collecting overpayments accrued in the Temporary Assistance for Needy Families program, the Aid to Families with Dependent Children program and the food stamp program from people who were minors in the household at the time that their parent or other caretaker received the overpayment.

LD 1933

Resolve, Establishing the Blue Ribbon Commission to Address the Financing of Long-term Care

**RESOLVE 114
EMERGENCY**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE MARTIN	OTP-AM	H-910 S-556 GOLDTHWAIT

LD 1933 proposed to establish a blue ribbon commission to investigate and analyze the future costs of providing long-term health care to elderly and disabled adults and recommend an integrated system of financing the projected costs of these services.

The commission would investigate all relevant questions bearing on this issue, including but not limited to the following:

1. Whether the financial risk associated with uncertain long-term health care costs should be shared through some type of public or private insurance system;
2. Whether individuals should be encouraged or required to begin saving for predictable long-term health care needs at earlier ages; and
3. Whether each generation of working adults should pay for the long-term care costs of their parents' and grandparents' generations.

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The commission would be funded with grants, donations and other nonstate-funded sources of revenue.

Committee Amendment "A" (H-910) proposed to replace the concept draft and establish the Blue Ribbon Commission to Address the Financing of Long-term Care to address the escalating costs of long-term care and propose a comprehensive plan that addresses the financing of future needs while preserving high quality and promoting individual choice. It proposed to add a fiscal note.

Senate Amendment "A" to Committee Amendment "A" (S-556) was prepared pursuant to action taken by the Legislative Council on March 26, 2002.

The amendment proposed to make the following changes.

1. Alter the authority for appointing members of the commission. Under this amendment, the Speaker of the House of Representatives, rather than the Governor, appoints the representative of an academic or public policy institute with expertise in health care economics or finance and the representative of an accounting firm with expertise in health care financing. In addition, the President of the Senate, rather than the Governor, appoints the member of a statewide organization representing financial institutions;
2. Change from 60 days to 15 days the length of time after the appointment of all members that the first meeting of the commission must be held;
3. Limit the commission to holding a maximum of 4 meetings per year, remove language that would have required that meetings be held in various areas of the State and prohibit the commission from meeting during the legislative session;
4. Refine language regarding the ability of the commission to seek and accept other sources of funds;
5. Incorporate language from House Amendment "B" to Committee Amendment "A," which allows the commission to seek staff assistance from the Office of Policy and Legal Analysis through the Legislative Council;
6. Incorporate language from House Amendment "B" to Committee Amendment "A," which gives legislators who are members of the commission legislative per diem and reimbursement for their expenses, and in addition specify that if other sources of funds become available, they may be used to compensate members of the commission;
7. Clarify the date by which the commission's reports must be submitted, and require that the commission's interim report be presented to the Legislature as well as to the Long-term Care Implementation Committee;
8. Add language required by the Joint Rules to the section governing the administration of the commission's budget; and
9. Add a new appropriation and allocation section to reflect these changes.

Enacted law summary

Resolve 2001, chapter 114 establishes a blue ribbon commission to address the escalating costs of long-term care and propose a comprehensive plan that addresses the financing of future needs while preserving high quality and

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promoting individual choice. The commission will investigate all relevant questions bearing on this issue, including but not limited to the following:

1. Whether the financial risk associated with uncertain long-term health care costs should be shared through some type of public or private insurance system;
2. Whether individuals should be encouraged or required to begin saving for predictable long-term health care needs at earlier ages; and
3. Whether each generation of working adults should pay for the long-term care costs of their parents' and grandparents' generations.

The Commission is required to submit its report, along with any recommended implementing legislation, to the Health and Human Services Committee no later than November 6, 2003.

Resolve 2001, chapter 114 was finally passed as an emergency measure effective April 11, 2002.

LD 1934

Resolve, to Provide Access to Personal Care Assistant Home Care Services

**RESOLVE 94
EMERGENCY**

Sponsor(s)
FULLER
LONGLEY

Committee Report
OTP-AM

Amendments Adopted
H-997

LD 1934 proposed to require the Department of Human Services to amend immediately its rules regarding reimbursement for personal care assistant home care services by increasing the reimbursement rate for these services by \$1 per hour. The department also would be required to review its rules regarding the reimbursement structure for personal care assistant home care services, identify barriers to those services, revise rules as necessary to improve the delivery of those services and report to the Joint Standing Committee on Health and Human Services by October 1, 2002.

Committee Amendment "A" (H-997) proposed to require review of the rules for reimbursement for personal care assistant services, identification of barriers and revision of rules to improve the delivery of those services. A report would be required by January 15, 2003.

Enacted law summary

Resolve 2001, chapter 94 requires the Department of Human Services to review its rules regarding the reimbursement structure for personal care assistant home care services, identify barriers to those services, revise rules as necessary to improve the delivery of those services and report to the Joint Standing Committee on Health and Human Services by January 15, 2003.

Resolve 2001, chapter 94 was finally passed as an emergency measure effective April 3, 2002.

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LD 1947

Resolve, to Establish a Demonstration Project to Review Requirements Imposed on Agencies Contracting with the Department of Behavioral and Developmental Services

RESOLVE 92

Sponsor(s)
NASS

Committee Report
OTP-AM

Amendments Adopted
H-909

LD 1947 proposed to require the Department of Behavioral and Developmental Services to develop a methodology for reimbursing providers of services for any new state or federal rule, regulation or contract requirement that increases the cost of providing current services.

Committee Amendment "A" (H-909) proposed to replace the language in the resolve. It proposed to require the Department of Behavioral and Developmental Services to undertake a demonstration project to review increased costs to contracting agencies necessitated by changes dictated by the department, to develop strategies for achieving savings within those agencies, to review existing requirements in order to identify costs that may be minimized and to report to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 15, 2003. The amendment also proposed to add a fiscal note.

Enacted law summary

Resolve 2001, chapter 92 requires the Department of Behavioral and Developmental Services to undertake a demonstration project to review increased costs to contracting agencies necessitated by changes dictated by the department, to develop strategies for achieving savings within those agencies, to review existing requirements in order to identify costs that may be minimized and to report to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 15, 2003.

LD 1949

An Act to Clarify Roles and Positions within the Department of Behavioral and Developmental Services

PUBLIC 493

Sponsor(s)
FULLER
TURNER

Committee Report
OTP

Amendments Adopted

LD 1949 proposed to clarify the reporting structure for regional directors and eliminate a position no longer existing within the Department of Behavioral and Developmental Services.

Enacted law summary

Public Law 2001, chapter 493 clarifies the reporting structure for regional directors and eliminates a position no longer existing within the Department of Behavioral and Developmental Services.

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LD 1963

An Act to Amend the Laws Governing Eligibility for General Assistance

PUBLIC 571

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
DUNCAN DAVIS P	OTP-AM	H-878

LD 1963 proposed to amend the definition of a "lump sum payment" governing eligibility for general assistance to be consistent with other portions of the law.

Committee Amendment "A" (H-878) proposed to modify the method of prorating lump sum income when determining general assistance eligibility. It also proposed to clarify that lump sum income is prorated even when it is received prior to the initial application and it permits initial applicants to receive general assistance in an emergency if the sole reason they were ineligible was due to the proration of a lump sum income. The amendment also proposed to direct the Department of Human Services to convene a group of interested parties to investigate the adequacy of the maximum levels of assistance in the general assistance program and report back to the joint standing committee of the Legislature having jurisdiction over health and human services matters.

Enacted law summary

Public Law 2001, chapter 571 amends the definition of a "lump sum payment" governing eligibility for general assistance to be consistent with other portions of the law. It modifies the method of prorating lump sum income when determining general assistance eligibility. It also clarifies that lump sum income is prorated even when it is received prior to the initial application and it permits initial applicants to receive general assistance in an emergency if the sole reason they were ineligible was due to the proration of a lump sum income. It also directs the Department of Human Services to convene a group of interested parties to investigate the adequacy of the maximum levels of assistance in the general assistance program and report back to the joint standing committee of the Legislature having jurisdiction over health and human services matters.

LD 1998

An Act to Establish the Asthma Prevention and Control Program in the Department of Human Services, Bureau of Health

PUBLIC 555

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FULLER TURNER	OTP-AM	H-877

LD 1998 proposed to establish an asthma prevention and control program to provide leadership for and coordination of asthma prevention and intervention activities within the State. The program would be authorized to receive federal grant money and would consult with statewide organizations concerned with the treatment and prevention of asthma.

Enacted law summary

Public Law 2001, chapter 555 establishes an asthma prevention and control program to provide leadership for and coordination of asthma prevention and intervention activities within the State. The program is authorized to receive

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federal grant money. The program will consult with statewide organizations concerned with the treatment and prevention of asthma.

LD 2000 **Resolve, Directing the Department of Human Services to Apply for a Federal Waiver to Provide Medicaid Benefits to Uninsured Residents with a Diagnosis of Cancer** **RESOLVE 84**

<u>Sponsor(s)</u> SHIELDS TURNER	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-876
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LD 2000 proposed to direct the Department of Human Services to apply for a waiver to establish a Medicaid cancer program. Coverage under the program would be limited to persons who have inadequate health care coverage and would cover only the diagnosis and treatment of cancer. Coverage would not begin until the waiver has been obtained from the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services and the Legislature has approved the operation of the program and appropriated funding for coverage in the biennial budget.

Committee Amendment "A" (H-876) proposed to remove from the Medicaid cancer program the requirement of 6 months' residency, reduce the income limitation to 250% of the federal poverty level, remove the definition of "inadequate insurance coverage" and remove the requirement of repayment to the State. The amendment also proposed to add a fiscal note to the resolve.

Enacted law summary

Resolve 2001, chapter 84 directs the Department of Human Services to apply for a waiver to establish a Medicaid cancer program. Coverage under the program is limited to persons who lack health care coverage and covers only the diagnosis and treatment of cancer. Coverage may not begin until the waiver has been obtained from the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services and the Legislature has approved the operation of the program and appropriated funding for coverage in the biennial budget.

LD 2007 **Resolve, to Address the Crisis in Direct-care Staff in the Long-term Care System** **RESOLVE 85
EMERGENCY**

<u>Sponsor(s)</u> KANE MARTIN	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> H-886
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LD 2007 proposed to direct the Department of Human Services, the State Board of Nursing and the State Board of Education to undertake initiatives regarding the training and certification of unlicensed direct-care staff in the long-term care system. The resolve also proposed to require those entities to initiate a public awareness campaign and to propose legislation expanding training opportunities.

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Committee Amendment "A" (H-886) proposed to replace the resolve. It proposed to require reporting to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding training and certification of unlicensed direct-care staff and require a group of interested parties to meet to collaborate on a public awareness campaign regarding career opportunities in long-term care and to report to the same committee.

The amendment also proposed to add a fiscal note to the resolve.

Enacted law summary

Resolve 2001, chapter 85 directs the Department of Human Services, the State Board of Nursing and the State Board of Education to review the rules regarding training and certification of unlicensed direct-care staff in the long-term care system. It requires reporting to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding training and certification of unlicensed direct-care staff and requires a group of interested parties to meet to collaborate on a public awareness campaign regarding career opportunities in long-term care and to report to the same committee.

Resolve 2001, chapter 85 was finally passed as an emergency measure effective March 25, 2002.

LD 2013

An Act to Promote the Health of Maine Women and Girls

INDEF PP

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
COLWELL	OTP-AM MAJ	H-875
TREAT	ONTP MIN	

LD 2013 proposed to continue the Women's Health Initiative started by the 119th Legislature and coordinated by the Department of Human Services, Bureau of Health. The initiative would be implemented through a state contract. The purpose of the initiative is to improve the health status of and access to health services for women and girls. The initiative would be funded with General Fund money for an amount to be contracted out to the entity that provides the services for the program.

Committee Amendment "A" (H-875) was the majority report. It changed the General Fund appropriation for fiscal year 2002-03 from \$250,000 to \$100,000. It also added a fiscal note.

LD 2026

An Act to Transfer Responsibility for Determining Eligibility for the Elderly Low-cost Drug Program from the Department of Administrative and Financial Services to the Department of Human Services

PUBLIC 691

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
O'BRIEN L	OTP-AM	H-911
TURNER		S-553 GOLDTHWAIT

LD 2026 proposed to transfer the responsibility for determining eligibility for the low-cost drug program from the Department of Administrative and Financial Services, Bureau of Revenue Services to the Department of Human

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Services, Bureau of Family Independence in order to better coordinate the program with the Healthy Maine Prescription Program and the Maine Rx Program. Transfer of the program would be completed by January 1, 2003.

Committee Amendment "A" (H-911) proposed to add a provision on retention of eligibility and enact the appropriations and allocations and positions necessary for the transfer of the eligibility function to the Department of Human Services.

Senate Amendment "A" (S-553) proposed to correct reference to a budget line in the committee amendment.

Enacted law summary

Public Law 2001, chapter 691 transfers the responsibility for determining eligibility for the low-cost elderly drug program from the Department of Administrative and Financial Services, Bureau of Revenue Services to the Department of Human Services, Bureau of Family Independence in order to better coordinate the program with the Healthy Maine Prescription Program and the Maine Rx Program. Transfer of the program must be completed by January 1, 2003.

LD 2027

An Act Regarding Child Care Facility Laws

PUBLIC 645

Sponsor(s)
SIMPSON

Committee Report
OTP-AM

Amendments Adopted
H-972

LD 2027 proposed to make the following changes to the laws governing day care centers and nursery schools. These changes are necessitated by anticipated changes to the rules governing these facilities:

1. References to "day care center" would be changed to "child care facility";
2. The definition of "children" in the laws governing nursery schools, which is based on the age of a child, would be changed;
3. Provisions in the laws governing nursery schools regarding communicable diseases, ratios and administration of medications would be removed; and
4. The definitions of "day care centers" and "nursery school" would be changed.

Committee Amendment "A" (H-972) proposed to clarify language in the bill and provide specificity in the health requirements applicable to staff.

Enacted law summary

Public Law 2001, chapter 645 makes the following changes to the laws governing day care centers and nursery schools. These changes are necessitated by anticipated changes to the rules governing these facilities:

1. References to "day care center" are changed to "child care facility";

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2. The definition of "children" in the laws governing nursery schools, which is based on the age of a child, is changed;
3. Provisions in the laws governing nursery schools regarding communicable diseases, ratios and administration of medications are removed; and
4. The definitions of "day care centers" and "nursery school" are changed.

LD 2029

An Act to Amend the Laws Regarding Public Health

PUBLIC 574

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
KANE EDMONDS	OTP-AM	H-904

LD 2029 proposed to make the following changes to the laws regarding public health.

1. It proposed to rename the burial-transit permit the "disposition of human remains permit" and make other minor changes to the burial permit laws.
2. It proposed to require residents of the State intending to be married to record notice of their intentions in the office of the clerk of the municipality in which at least one of them resides. It also proposed to remove a reference to "justice of the peace" from the list of persons authorized to solemnize marriages.
3. It proposed to rename the Office of Vital Statistics within the Department of Human Services the Office of Health Data and Program Management.
4. It proposed to require the Department of Human Services, Bureau of Health to publish a state health plan biennially instead of annually.
5. It proposed to change a reference to a program for children who are crippled to a reference to a program for children who are disabled.
6. It proposed to repeal the Cancer Prevention and Control Advisory Committee and establish the Maine Cancer Registry Data Review Committee.
7. It proposed to amend the laws governing personal use regarding owner testing for radon.
8. It proposed to make changes to the laws governing public notification that must be given by a public water system to conform the requirements to federal regulation.

Committee Amendment "A" (H-904) proposed to add an option for handwritten information from the medical examiner and to clarify the language regarding the Cancer Registry Data Review Committee.

Enacted law summary

Public Law 2001, chapter 574 makes the following changes to the laws regarding public health.

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1. It renames the burial-transit permit the "disposition of human remains permit" and makes other minor changes to the burial permit laws.
2. It requires residents of the State intending to be married to record notice of their intentions in the office of the clerk of the municipality in which at least one of them resides. It also removes a reference to "justice of the peace" from the list of persons authorized to solemnize marriages.
3. It renames the Office of Vital Statistics within the Department of Human Services the Office of Health Data and Program Management.
4. It requires the Department of Human Services, Bureau of Health to publish a state health plan biennially instead of annually.
5. It changes a reference to a program for children who are crippled to a reference to a program for children who are disabled.
6. It repeals the Cancer Prevention and Control Advisory Committee and establishes the Maine Cancer Registry Data Review Committee.
7. It amends the laws governing personal use regarding owner testing for radon.
8. It makes changes to the laws governing public notification that must be given by a public water system to conform the requirements to federal regulation.

LD 2038

An Act to Amend the Lead Poisoning Control Act

PUBLIC 683

Sponsor(s)
MATTHEWS
EDMONDS

Committee Report
OTP-AM

Amendments Adopted
H-1007

LD 2038 was a concept draft pursuant to Joint Rule 208. The bill proposed to assist the Maine Lead Advisory Council in testing high-risk children for lead poisoning by utilizing information that has already been obtained by the State.

Committee Amendment "A" (H-1007) proposed to replace the bill and its title. It proposed to require the Department of Human Services to distribute information on lead poisoning and to develop and distribute a lead poisoning risk assessment tool. It proposed to require primary health care providers for children to test for blood lead levels in all children one year of age and 2 years of age who are covered by the MaineCare program, which succeeded the Medicaid and Cub Care programs, and to test all children one year of age and 2 years of age unless, in the professional judgment of the attending physician, in conjunction with the use of the lead poisoning risk assessment tool, the child's level of risk does not warrant a blood lead level test. The amendment proposed to require the Department of Human Services to report by March 1, 2005 on the incidence of lead poisoning risk assessment and blood lead level testing. The amendment proposed to require the Department of Human Services to convene a task force of representatives of pertinent health care organizations to determine a standard lead poisoning risk assessment tool for use statewide, to help disseminate the assessment tool and information on lead poisoning

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and to assist in developing additional recommendations that will increase lead screening in Maine. The amendment proposed to require the department to report by January 1, 2004 on the initial work of the task force to the joint standing committee of the Legislature having jurisdiction over health and human services matters. The amendment proposed to add an effective date of January 1, 2003, an appropriation and a fiscal note to the bill.

Enacted law summary

Public Law 2001, chapter 683 requires the Department of Human Services to distribute information on lead poisoning and to develop and distribute a lead poisoning risk assessment tool. Primary health care providers for children are required to test for blood lead levels in all children one year of age and 2 years of age who are covered by the MaineCare program and to test all children one year of age and 2 years of age unless, in the professional judgment of the attending physician, the child's level of risk does not warrant a blood lead level test. The law requires the Department of Human Services to convene a task force of representatives of pertinent health care organizations to determine a standard lead poisoning risk assessment tool for use statewide, to help disseminate the assessment tool and information on lead poisoning and to assist in developing additional recommendations that will increase lead screening in Maine. The department must report to the joint standing committee of the Legislature having jurisdiction over health and human services matters by January 1, 2004 on the initial work of the task force and by March 1, 2005 on the results of the lead poisoning risk assessment and blood lead level testing.

Public Law 2001, chapter 683 has an effective date of January 1, 2003.

LD 2045	An Act to Enhance Consumer-directed Personal Assistance Services for Maine Citizens with Disabilities	ONTP
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
QUINT	ONTP	

LD 2045 proposed to provide that the Department of Labor, Bureau of Rehabilitation Services is the lead agency for providing consumer-directed personal assistance services to citizens of this State with disabilities. The bureau would administer state-funded and Medicaid-funded, consumer-directed personal assistance services programs for people with disabilities and ensure that these services are delivered in the most comprehensive manner possible. See Public Law 2001, chapter 559, part BB for these provisions.

LD 2050	Resolve, Regarding Legislative Review of Chapters I to IV: Regulations Governing the Licensing and Functioning of Assisted Living Facilities, a Major Substantive Rule of the Department of Human Services	RESOLVE 90 EMERGENCY
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
	OTP-AM	H-905

LD 2050 proposed to provide for legislative review of Chapters I to IV: Regulations Governing the Licensing and Functioning of Assisted Living Facilities, a major substantive rule of the Department of Human Services.

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Committee Amendment "A" (H-905) proposed to require that the rules be amended to require distribution of a brochure to new residents.

Joint Standing Committee on Health and Human Services

Enacted law summary

Resolve 2001, chapter 90 provides for legislative review of Chapters I to IV: Regulations Governing the Licensing and Functioning of Assisted Living Facilities, a major substantive rule of the Department of Human Services. The resolve also requires the facilities to distribute resident brochures prepared by the Long-term Care Ombudsman Program.

Resolve 2001, chapter 90 was finally passed as an emergency measure effective March 28, 2002.

LD 2113	An Act to Improve Access to Prescription Drugs for Persons who are Elderly or Disabled	PUBLIC 650 EMERGENCY
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<u>Sponsor(s)</u> TREAT LEMOINE	<u>Committee Report</u> OTP-AM	<u>Amendments Adopted</u> S-506
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LD 2113 proposed to require the Department of Human Services to apply to the federal Centers for Medicare and Medicaid Services for a waiver or amend a pending or current waiver under the Medicaid program authorizing the department to use federal matching dollars to enhance the prescription drug benefits available to persons who currently qualify for the elderly low-cost drug program.

Committee Amendment "A" (S-506) proposed to add an emergency clause to the bill, to provide the details of financial eligibility and to require a report by January 12, 2003.

Enacted law summary

Public Law 2001, chapter 650 requires the Department of Human Services to apply to the federal Centers for Medicare and Medicaid Services for a waiver or to amend a pending or current waiver under the Medicaid program authorizing the department to use federal matching dollars to enhance the prescription drug benefits available to persons who currently qualify for the elderly low-cost drug program. The law requires a report by January 12, 2003 to the Health and Human Services Committee.

Public Law 2001, chapter 650 was enacted as an emergency measure effective April 9, 2002.

LD 2158	Resolve, to Name the New Psychiatric Treatment Center Located in Augusta	RESOLVE 79
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<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
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LD 2158 proposed to establish the name for the new psychiatric center located in Augusta as Riverview Psychiatric Center.

Joint Standing Committee on Health and Human Services

Enacted law summary

Resolve 2001, chapter 79 establishes the name for the new psychiatric center located in Augusta as Riverview Psychiatric Center.

LD 2164

An Act to Provide Government with the Necessary Authority to Respond to a Public Health Emergency Caused by an Act of Bioterrorism

PUBLIC 694

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
SAXL	OTP-AM A	H-1062
BENNETT	OTP-AM B	
	ONTP C	

LD 2164 included the following proposals regarding the laws governing emergency health powers.

1. It proposed to relieve the Department of Human Services from the requirement to adopt emergency rules in the event of a public health emergency and instead allow the department to implement rules previously adopted designated to become effective upon the declaration of a state of public health emergency.
2. It proposed to allow the Department of Human Services to exercise its public health emergency powers upon a declaration of a state of public health emergency by the Governor.
3. It proposed to allow the Department of Human Services to have access to certain health information or take a person into temporary custody and order specific emergency care, vaccination, treatment or evaluation in the event of a public health emergency if the department has reasonable cause to believe the person has either been exposed to or is at risk of transmitting a communicable disease that poses a serious and imminent threat to human or animal life; there is no less restrictive alternative available to safeguard the public health and safety; and the delay involved in securing a court order would pose an imminent risk to the person or pose a serious risk of transmission of the communicable disease. A person could not be detained more than 72 hours without judicial review.
4. It proposed to eliminate the requirement that the Department of Human Services file with the court treatment plans and report subsequent to the issuance of a court order for involuntary medical treatment, subject to the requirement that any such order must be subject to judicial review within 30 days.
5. It proposed to allow the Department of Human Services to dispose of the remains of victims of a communicable disease during a public health emergency if there are no less restrictive alternatives to protecting public health or safety from the threat of communicable disease.
6. It proposed to require that if the Governor or another person who declares by proclamation a state of public health emergency, the Governor or that person shall, to the extent feasible, also disseminate that proclamation to persons with disabilities.

Joint Standing Committee on Health and Human Services

7. It proposed to require the Governor to convene the Public Health Emergency Planning Commission to review the provisions of state law relevant to public health emergency preparedness, consider measures to safeguard individual dignity and medical record confidentiality and examine strategies to protect the public from the threat of communicable diseases and acts of bioterrorism and report back to the Joint Standing Committee on Health and Human Services and the Legislative Council.
8. It proposed to require the Joint Standing Committee on Appropriations and Financial Affairs to develop a mechanism for the financing of a response to a declaration of a state of public health emergency by the Governor, the Governor's designee or a person acting in place of the Governor.

Committee Amendment "A" (H-1062), the majority report of the Health and Human Services and Judiciary committees, proposed to replace the bill while incorporating the bill's central pieces of a system for the Department of Human Services to address extreme public health emergencies, including a medical-legal advisory panel. It proposed to repeal the entire Act on October 31, 2003.

Enacted law summary

Public Law 2001, chapter 694 includes the following changes to the laws governing emergency health powers.

1. It relieves the Department of Human Services from the requirement to adopt emergency rules in the event of a public health emergency and instead allows the department to implement rules previously adopted designed to become effective upon the declaration of a state of public health emergency.
2. It allows the Department of Human Services to exercise its public health emergency powers upon a declaration of a state of public health emergency by the Governor.
3. It allows the Department of Human Services to have access to certain health information or take a person into temporary custody and order specific emergency care, vaccination, treatment or evaluation in the event of a public health emergency if the department has reasonable cause to believe the person has either been exposed to or is at risk of transmitting a communicable disease that poses a serious and imminent threat to human or animal life; there is no less restrictive alternative available to safeguard the public health and safety; and the delay involved in securing a court order would pose an imminent risk to the person or pose a serious risk of transmission of the communicable disease. A person may not be detained more than 48 hours without judicial review.

LD 2170

**An Act to Ensure Maine Citizens in Recovery from Drug Addiction
Equal Access to Public Assistance**

PUBLIC 598

Sponsor(s)
PEAVEY
TURNER

Committee Report
OTP-AM

Amendments Adopted
H-1003

LD 2170 proposed to provide that a person who is otherwise eligible to receive food assistance under the federal Food Stamp Act of 1977 or to receive Temporary Assistance for Needy Families may not be denied assistance because the person has been convicted of a drug-related felony. Federal law denies assistance to such a person unless a state legislature enacts legislation exempting its citizens from this prohibition.

Joint Standing Committee on Health and Human Services

Enacted law summary

Public Law 2001, chapter 598 provides that a person who is otherwise eligible to receive food assistance under the federal Food Stamp Act of 1977 or to receive Temporary Assistance for Needy Families may not be denied assistance because the person has been convicted of a drug-related felony. Federal law denies assistance to such a person unless a state legislature enacts legislation exempting its citizens from this prohibition.

LD 2195

**An Act to Implement the Recommendations of the Commission to
Study Assisted Living**

PUBLIC 596

Sponsor(s)

Committee Report

Amendments Adopted

LD 2195 proposed to repeal the Maine Revised Statutes, Title 22, chapter 1665 on assisted living programs and reenact it as chapter 1664. It proposed to change the name of the chapter to Assisted Housing Programs, dividing the programs into independent housing with services, assisted living and residential care facilities. It proposed to update the definitions of "activities of daily living" and "instrumental activities of daily living." It proposed to change the law on fire safety for residential care and assisted living. It proposed to update the chapter to reflect the 3 categories of assisted housing programs. This bill proposed to provide for an effective date of October 1, 2002 and for the continuation of rules applicable to assisted living programs and services until new rules are adopted by the Department of Human Services.

Enacted law summary

Public Law 2001, chapter 596 repeals the Maine Revised Statutes, Title 22, chapter 1665 on assisted living programs and reenacts it as chapter 1664. It changes the name of the chapter to Assisted Housing Programs, dividing the programs into independent housing with services, assisted living and residential care facilities. It updates the definitions of "activities of daily living" and "instrumental activities of daily living." It changes the law on fire safety for residential care and assisted living. It updates the chapter to reflect the 3 categories of assisted housing programs. It provides an effective date of October 1, 2002 and provides for the continuation of rules applicable to assisted living programs and services until new rules are adopted by the Department of Human Services.

HP 1671

**JOINT ORDER, Relative to the Task Force to Study the Creation
of a Registry of Personal Care Attendants**

**DIED BETWEEN
BODIES**

Sponsor(s)
DUDLEY

Committee Report
OTP-AM

Amendments Adopted

HP 1671 proposed to establish a Task Force to Study the Creation of a Registry of Personal Care Attendants. The task force would have consisted of 9 persons and would have assessed the need for a registry of personal care attendants who work with persons with mental retardation.

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